U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 180 40	2. Fiscal Year Covered From:		
·	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Charles H Wash	Name Sheet Metal Workers' Local 80		
	Labor Organization File Number 06 0393		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 26720 Greenleaf	Street 17100 W. 12 Mile Road 2nd Floor		
City Roseville	City Southfield		
State Michigan ZIP Code +4 48066-3307	State Michigan ZIP Code + 4 48076 - 2115		

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name SMACNA, Detroit Chapter	Annual CHristmas Party at the Detroit Athletic Club on December 11			
Trade Name, if any:	···			
P.O. Box, Bldg., Room No., if any				
	7.b. Amount.			
Street 3221 W. Big Beaver Suite 305				
City Troy	\$125			
State Michigan ZIP Code + 4 48084				

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information.
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed AM		Il lih	n l
Signed /	lla.	N WILL	7
			,

Qn 08/12/2005

(248) 557-7575

Date

Telephone Number

DISCLAIMER

The transactions, dealings and interests that are detailed in the attached LM-30 report represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 through December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will immediately file an amended LM-30 Report.

Walle DWark 8.12.05

Signature

Date